ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	MtW	50	05-31-9
FORMALITY REVIEW	41)	670	67 09 01
RESPONSE FORMALITY REVIEW	Mo	lean	10/1/10

INDEX OF CLAIMS

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— (Through numeral) Canceled	A Appeal
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